



90 Locust St.  
587-1040  
www.northamptonma.gov/recreation



### Mandatory Player Evaluations

#### **Grades 3 - 8**

- ♦ Evaluations are held November 4, 11 for grades 3-8.
- ♦ Practices begin December 2, with a 10 game schedule beginning in January to the end of March.

All participants, even those that played last year, in grades 3-8 must attend one evaluation session. These are *evaluations*, not tryouts. Everyone who signs up plays. Evals include scrimmages & drills. Children in grades K, 1-2 will not be evaluated.

- All participants play in every game.
- Every player receives a team t-shirt to keep.
- All coaches are certified by Recreation Staff through the National Youth Sport Coaches Association (NYSCA), as well as having a background check (CORI).

### Registrations

Registrations are being taken at the Recreation Department, 90 Locust St., Monday through Friday, 8:30-4:30, or you may drop the form through the 24 hour mail slot in the door. Registrations will also be taken during the evaluation sessions at Smith School from 9 a.m.-1 p.m. on Nov. 4 & 11

### Fees

**Grades K, 1-2: \$35.00**

**Grades 3-8: \$45.00**

**(\$5 extra after 11/11 if spots open)**

**Non-Residents add \$10.00 per child**  
**Checks payable to: City of Northampton**  
**VISA/Mastercard Accepted**

### Coed Kinderball

Saturdays

**Grade 1 & 2**

Saturday afternoons

**Grade 3 & 4**

Saturday mornings & early afternoon ,  
practices held weeknights

**Grade 5 & 6, 7 & 8**

Saturdays, practices held weeknights

**\*\*Registration Deadline:**

**NOVEMBER 11, 2006\*\***

\*Players must arrive at the start of their scheduled time, dressed to play.

\*All players will be notified by their coach prior to the first practice December 2.

1:00 - 2:00 p.m.

### **Northampton Recreation Department - 2006-2007 Youth Hoop League**



Child's Name: \_\_\_\_\_ Gender \_\_\_\_ Age \_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_ School \_\_\_\_\_

Parent(s) Name \_\_\_\_\_ Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Address: \_\_\_\_\_ Special Comments: (Allergies, etc.) \_\_\_\_\_  
# street town/zip

Emergency Contact Name (other than parent) \_\_\_\_\_ Phone \_\_\_\_\_

Has your child ever played Suburban/Travel League Basketball? \_\_\_\_ Yes or \_\_\_\_ No How many years? \_\_\_\_

Where did you hear about this program? Played last year \_\_\_\_ program guide \_\_\_\_ Rec. web site \_\_\_\_ Other \_\_\_\_

Did your child play in the league last year? yes \_\_\_\_ no \_\_\_\_ Height(grades 3-8 only): \_\_\_\_

AMOUNT ENCLOSED: \$ \_\_\_\_

**Charge my:** ☐ Visa ☐ Mastercard

Name on card: \_\_\_\_\_ Card # \_\_\_\_\_

Expiration: \_\_\_\_\_ Signature of Card Holder \_\_\_\_\_



**COACHES:** We need coaches/assistant coaches! TRAINING PROVIDED! Clinics are scheduled for the first & second week of November. If you would like to be part of this program, please sign below. We also need coaches to help with evaluations. If you are able to help with evaluations on either November 4th or 11th, contact Kathy at 587-1040 or kweston@northamptonma.gov.

Name (of person wishing to coach) \_\_\_\_\_ Tel#(home) \_\_\_\_\_ (work) \_\_\_\_\_

Date Received \_\_\_\_\_ Staff \_\_\_\_\_ Amount: \_\_\_\_ Ck \_\_\_\_ Cash \_\_\_\_ Visa/MC \_\_\_\_ Date entered RT: \_\_\_\_ Staff \_\_\_\_\_